

Application Data Sheet

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	APPARATUS FOR SEISMIC MEASUREMENTS
Attorney Docket Number::	3657-1020
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: NORWAY  
Status:: Full Capacity  
Given Name:: SVERRE  
Middle Name::  
Family Name:: PLANKE  
Name Suffix::  
City of Residence:: OSLO  
State or Province of  
Residence::  
Country of Residence:: NORWAY  
Street of Mailing Address:: ARNEBRATVEIEN 30C  
City of Mailing Address:: OSLO  
State or Province of Mailing Address::  
Country of Mailing Address:: NORWAY  
Postal or Zip Code of Mailing Address:: N-0771

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: NORWAY  
Status:: Full Capacity  
Given Name:: CHRISTIAN  
Middle Name::  
Family Name:: BERNDT  
Name Suffix::  
City of Residence:: HAMPSHIRE  
State or Province of  
Residence::  
Country of Residence:: GREAT BRITAIN  
Street of Mailing Address:: 4 SURREY ROAD  
City of Mailing Address:: HAMPSHIRE

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State or Province of Mailing Address::

Country of Mailing Address:: GREAT BRITAIN

Postal or Zip Code of Mailing Address:: SO19 9ED

**Correspondence Information**

Correspondence Customer 000466

Number::

**Representative Information**

Representative Customer	000466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/NO03/00079	3/6/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
NORWAY	20021140	3/7/02	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::